N1200000 7351

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
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(Our insent Falls Normal)			
(Business Entity Name)			
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A GOAL SECTION

COVER LETTER

TO: Amendment Section
- Division of Corporations

Bruck Family Foundation, Inc AME OF CORPORATION:
N12000007351
OCUMENT NUMBER:
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
Carrie Christino
(Name of Contact Person)
oho Capital, LLC
(Firm/ Company)
01 S Howard Ave Ste 106-322
(Address)
ampa, FL 33606
(City/ State and Zip Code)
Carrie@soho-capital.com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Carrie Christino 813-557-4901
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) \$ Certified Copy (Additional Copy is Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Bruck Family Foundation, Inc		
(Name of Corporation	on as currently filed with t	he Florida Dept. of State)
N12000007351		
(Doc	ument Number of Corporati	on (if known)
Pursuant to the provisions of section 617.1006, Flumendment(s) to its Articles of Incorporation:	orida Statutes, this Florida	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the	<u>le corporation:</u>	
		The new
name must be distinguishable and contain the wor 'Company" or "Co." may not be used in the nan	rd "corporation" or "incor _i ne	porated" or the abbreviation "Corp." or "Inc."
		
B. Enter new principal office address, if applic		
Principal office address <u>MUST BE A STREET</u>	<u>ADDKESS</u>)	
	-,,	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
		
		
). If amending the registered agent and/or regi	istored office address in VI	oride onto the name of the
new registered agent and/or the new register	red office address:	orida, enter the name of the
Nome of New Posistaned Assets	David Koche	
Name of New Registered Agent:	(01 D 1 D) 10 20	
	601 Bayshore Blvd Ste 70	0
New Registered Office Address:		(Florida street address)
	Tampa	22.00
	1 dilipe	, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing I	Registered Agent:	1 1
hereby accept the appointment as registered agen	t. I am familiar with and a	eccept the obligations of the position.
	1/ [
_	/	7 F. 5 7
_	Signature of New.	
		Registered Agent, if changing
	/	25 S
	Page 1 of 4	···.
		9: 9: 9: 9: 1

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add	<u>V</u> <u>Mil</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Agent	Charles Harper	100 N Tampa Ste
Add			Ste 2700
x Remove			Tampa, FL 33602
2) Change	AREP	Charles Harper	100 N Tampa Ste
Add			Ste 2700
x Remove			Tampa, FL 33602
3) Change			
Add			
Remove			
4) Change			19 C
Add			2 - 2
Remove			3, 0
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
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Page 3 of 4

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	e date of each amendment(s) adoption: c this document was signed.	_, if other than the
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	e listed as the
٩d	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 10/14/2019	
	Signature (By the chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
	Charles Bruck	
	(Typed or printed name of person signing)	
	Manage (Title of person signing)	
	(the ary country	
		FILED 19 OCT 22 M 9: 23
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